

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

91882949

CLAIMS AS FILED - PART I

| FOR | (Column 1) NUMBER FILED | (Column 2) NUMBER EXTRA |
|----------------------------------|----------------------------|----------------------------|
| BASIC FEE | | |
| TOTAL CLAIMS | 14 minus 20 = * | |
| INDEPENDENT CLAIMS | 5 minus 3 = * | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE ☐

OR OTHER THAN
SMALL ENTITY

| RATE | FEE |
|-------|-----|
| | |
| | |
| | |
| | |
| | |
| TOTAL | |

| RATE | FEE |
|-------|-----|
| | |
| | |
| | |
| | |
| | |
| TOTAL | |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------|---|---|
| AMENDMENT A | 200 2/3-103 | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * 11 | Minus | ** = |
| Independent | * 4 | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| | |
| | |
| | |
| | |
| TOTAL ADDIT. FEE | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| | |
| | |
| | |
| | |
| TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|------------|---|---|
| AMENDMENT B | 2/18/05 | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * 13 | Minus | ** 20 = |
| Independent | * 6 | Minus | *** 3 = 3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| | |
| | |
| | |
| | |
| TOTAL ADDIT. FEE | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| | |
| 50 | |
| 200 | 600 |
| | |
| TOTAL ADDIT. FEE | 1000 |

| | (Column 1) | (Column 2) | (Column 3) |
|--|------------|---|---|
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * | Minus | ** = |
| Independent | * | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| | |
| | |
| | |
| | |
| TOTAL ADDIT. FEE | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| | |
| | |
| | |
| | |
| TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.